REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL

CUSTOMER NO. 29863 DELAND LAW OFFICE

P.O. Box 69 Klamath River, CA 96050-0069 (530) 465-2430

In re application of: SHINPEI OKAJIMA, et al

Application No. 10/001,700

Filed: November 21, 2001

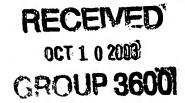
Group Art Unit: 3618

• For: SNOWBOARD BINDING

· MAIL STOP RCE **COMMISSIONER FOR PATENTS** P.O. Box 1450 Alexandria, VA 22313-1450

Atty. Docket No. SHM-98-005-5

I hereby certify that this is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 2, 2003



Commissioner:

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

ſ	XΊ	A petition to	extend time to res	pond in the abov	e-identified prior	application comp	lying with the (OG Notice of June 14,	1984 is enclosed.

Please enter the amendment under §1.116 dated ______ and unentered in the prior nonprovisional application.

[X] Please enter the enclosed amendment.

[] Enclosed is an Information Disclosure Statement under 37 CFR 1.97 [] with copies of cited foreign references.

[] Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months.

(Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required).

[X] Return Receipt Postcard (MPEP 503).

The required fees have been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	37	MINUS	37	0
INDEP.	16	MINUS	11	5

10/08/2003 SSITHIB1 00000099 10001700

02 FC:1801

770.00 OP

- [X] RCE fee \$ 770
- [X] Claims fee \$ 430
- [X] Time extension fee \$ 420
- [X] A check for \$_1,620 is enclosed.

Two copies of this sheet are enclosed.

Telephone: (530) 465-2430 Respectfully submitted, **DELAND LAW OFFICE**

SMALL ENTITY

ADDIT. FEE

RATE

x9=

x43 =

+145=

TOTAL ADDIT. FEE

\$

\$

\$

Reg. No.: 31,242

Attorney for Applicant

	OTHER THAN A SMALL ENTITY				
OR	RATE	ADDIT. FEE			
	x18=	\$			
	5x86=	\$430			
	+290=	\$			
	TOTAL	\$430			